

MOTOR VEHICLE INVENTORY REPORT

ODOMETER READING		YEAR 00	MAKE NISS	BODY STYLE 4DR	COLOR WHT	VIN	STATE LICENSE NUMBER	STATE	MO/YR. EXP	PLATE
PROPERTY INVENTORY NO.		UNIT	ARRIVED AT POUND Day Mo. Yr. 05 Nov 11		CITY LICENSE NO.		CITY	MO/YR. EXP	INVENTORY NO.	
RECOVERED BY - NAME		STAR NO.	UNIT	RECOVERED FROM Base Address		CHICAGO		06/12		
NAME OF DRIVER		TRUCK NO.	OWNER'S NAME		HOME TELEPHONE					
ENTERED INTO COMPUTER BY		DELETED BY	OWNER'S ADDRESS							
POST TOW HEARING <input type="checkbox"/> YES <input type="checkbox"/> NO		CITY	STATE		ZIP CODE		TIME RECEIVED			
DATE OF HEARING (DAY - MO. - YR.)		TIME	REASON TOWED		POUND		YARD LOCATION			
			DUI		6		Drop			

VEHICLE INVENTORY	EXTERIOR		ENGINE COMPARTMENT		INTERIOR	
	NO	YES	YES	NO	NO	YES
	DOORS LOCKED <input type="checkbox"/> <input checked="" type="checkbox"/>		ENGINE MISSING <input type="checkbox"/> <input checked="" type="checkbox"/> DUI		KEYS IN CAR <input checked="" type="checkbox"/> <input type="checkbox"/> No. _____	
	EXTERIOR DAMAGED <input type="checkbox"/> <input checked="" type="checkbox"/> (Explain in Remarks)		BATTERIES MISSING <input type="checkbox"/> <input checked="" type="checkbox"/> DUI		IGNITION DAMAGED/PULLED <input checked="" type="checkbox"/> <input type="checkbox"/>	
GLASS BROKEN <input checked="" type="checkbox"/> <input type="checkbox"/> (Explain in Remarks)		CARBURETOR MISSING <input type="checkbox"/> <input checked="" type="checkbox"/> DUI		SEATS MISSING <input checked="" type="checkbox"/> <input type="checkbox"/>		
HUB CAPS MISSING <input checked="" type="checkbox"/> <input type="checkbox"/> No. <u>0</u>		ALTERNATOR / GENERATOR MISSING <input type="checkbox"/> <input checked="" type="checkbox"/> DUI		CUSHIONS MISSING <input checked="" type="checkbox"/> <input type="checkbox"/> No. <u>0</u>		
TIRES MISSING <input checked="" type="checkbox"/> <input type="checkbox"/> No. <u>0</u>		AIR CLEANER MISSING <input type="checkbox"/> <input checked="" type="checkbox"/> DUI		REAR CUSHION PULLED <input checked="" type="checkbox"/> <input type="checkbox"/>		
APPARENT TIRE SWITCH <input checked="" type="checkbox"/> <input type="checkbox"/> No. <u>0</u>		RADIATOR MISSING <input type="checkbox"/> <input checked="" type="checkbox"/> DUI		FASHION PULLED <input type="checkbox"/> <input type="checkbox"/>		
WHEELS MISSING <input checked="" type="checkbox"/> <input type="checkbox"/> No. <u>0</u>		TRANSMISSION MISSING <input type="checkbox"/> <input checked="" type="checkbox"/> DUI		RADIO MISSING <input checked="" type="checkbox"/> <input type="checkbox"/>		
SUN ROOF MISSING <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> D.N.A.		AIR CONDITIONING COMPRESSOR MISSING <input type="checkbox"/> <input checked="" type="checkbox"/> DUI		PLAYER MISSING <input checked="" type="checkbox"/> <input type="checkbox"/>		
T-TOP MISSING <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> D.N.A.		OTHER - SPECIFY		TAPE PLAYER IN CAR <input checked="" type="checkbox"/> <input type="checkbox"/>		
OTHER - SPECIFY				TV / DVD IN CAR <input checked="" type="checkbox"/> <input type="checkbox"/>		
TRUNK LOCKED <input type="checkbox"/> <input checked="" type="checkbox"/>		MAXIMA		DASHBOARD DMGD / MISSING <input type="checkbox"/> <input checked="" type="checkbox"/>		
TRUNK LOCK PUNCHED <input checked="" type="checkbox"/> <input type="checkbox"/>				LAPTOP IN CAR <input checked="" type="checkbox"/> <input type="checkbox"/>		
SPARE TIRE IN VEHICLE <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> Unknown				CELLULAR PHONE IN CAR <input checked="" type="checkbox"/> <input type="checkbox"/>		
TOOLS IN VEHICLE <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> Unknown				GPS UNIT IN CAR <input checked="" type="checkbox"/> <input type="checkbox"/>		
OTHER - SPECIFY				MP3 PLAYER IN CAR <input checked="" type="checkbox"/> <input type="checkbox"/>		
				PDA IN CAR <input checked="" type="checkbox"/> <input type="checkbox"/>		
				OTHER - SPECIFY		
INVENTORIED BY (Print Name) PED				DATE POUND CLERK RECEIVED FILE <i>[Signature]</i>		

STOLEN VEHICLE OF OWNER NOTIFICATION	<input type="checkbox"/> DRIVABLE <input checked="" type="checkbox"/> NOT DRIVABLE		R.D. NO.		LOCAL OR FOREIGN STEAL	
	DATE NOTIFIED BY PHONE		TIME	PERSON NOTIFIED		NOTIFIED BY - NAME - STAR / EMPLOYEE NUMBER

TRANSFER OF VEHICLE	DATE TRANSFERRED		CHARGES	FROM	TO	RECEIVED BY - NAME - STAR/EMPLOYEE NO.

REMARKS	SPECIFY/DESCRIBE MISSING OR DAMAGED DOORS, FENDERS, HOOD, BUMPERS, ETC.					
	DS-Side Scrtchd, DS-Side Dented, RS-Trunk Scrtchd, RS-Trunk Dented, RS-Bumpr Dmcd, PS-Side Scrtchd, PS-Side Dented, PS-Rear Tire Broken, PS-Frnt Tire Broken, PS-Side Fndr Dmcd, PS-Hood Scrtchd, PS-Hood Dented, PS-Bumpr					
	HOLD		IF YES		REASON Dmcd	
	<input type="checkbox"/> NO <input type="checkbox"/> YES		<input type="checkbox"/> 5 DAY <input type="checkbox"/> EXTENDED			

DISPOSITION OF VEH. To be completed after Veh. is sold or released	<input type="checkbox"/> SOLD		DATE SOLD	PURCHASER NAME		ADDRESS
	<input type="checkbox"/> RELEASED		RELEASED TO - NAME		ADDRESS	
	DRIVERS LICENSE NO.		IDENTIFICATION USED FOR RELEASE		RECEIPT NO.	AMOUNT \$
	RELEASED BY - NAME		STAR / EMPLOYEE NO.		DATE RELEASED	TIME

Stolen Auto Check	DATE MADE	MADE BY - NAME	SECRETARY OF STATE CHECK	MADE BY - NAME

RT
ENT

1. BEAT OF ASSIGNMENT

1795R

2. BEAT OF OCCURRENCE

1731

3. RD. NO.

4. TOW (Check one)

☐ WITHOUT CONSENT OF PROPERTY OWNER/AGENT, VEHICLE OWNER UNKNOWN, AND A COMPLAINT (CPD-11.478) HAS BEEN SIGNED BY THE PROPERTY OWNER/AGENT.

☐ TRAFFIC CRASH - VEHICLES WHICH CANNOT BE DRIVEN SAFELY FROM THE SCENE, ARE OBSTRUCTING THE FLOW OF TRAFFIC, OR CAUSING A HAZARDOUS CONDITION, AND THE OPERATOR IS UNWILLING/UNABLE TO OBTAIN TOW.

☒ ARRESTEE'S PROPERTY - MOTOR VEHICLE CONTROLLED BY ARRESTEE.

☐ HAZARD - MOTOR VEHICLE OBSTRUCTING TRAFFIC FLOW. INDICATE VIOLATION IN NARRATIVE.

☐ HIT & RUN - LEAVING THE SCENE OF A MOTOR VEHICLE ACCIDENT. WHEN VEHICLE CONNECTED WITH AN ADDITIONAL OFFENSE, REQUEST OEC TO NOTIFY INVESTIGATING UNIT.

☐ NO INSURANCE AND ☐ SUSPENDED ☐ REVOKED OR ☐ NO DRIVER'S LICENSE (625 ILCS 6-101) - TOW OF A VEHICLE BELONGING TO AN INDIVIDUAL WHO HAS NO INSURANCE FOR THE VEHICLE AND NO DRIVER'S LICENSE OR WHOSE DRIVER'S LICENSE IS SUSPENDED OR REVOKED.

☐ PUBLIC ADMINISTRATOR'S/MEDICAL EXAMINER'S CASES - MOTOR VEHICLE OF DECEASED PERSON INVOLVED IN AN ESTATE OR MEDICAL EXAMINER'S CASE.

☐ STOLEN - TOW AUTHORIZED BY OWNER/COMPLAINANT. HAZARD OR RECOVERED VEHICLE ILLEGALLY PARKED, OR NEEDED FOR FURTHER INVESTIGATION.

5. IMPOUNDMENT (Check one)

☐ FLEEING OR ELUDING
MCC 9-92-035

☐ DUMPING ON REAL ESTATE
WITHOUT PERMIT MCC 7-28-440

☐ POSSESSION OF FIREARM IN
MOTOR VEHICLE MCC 8-20-015

☐ SOUND DEVICE RESTRICTION
MCC 11-4-1115

☐ STREET SOLICITATION FOR
PROSTITUTION MCC 8-8-060

☐ UNLAWFUL DRUGS IN MOTOR
VEHICLE MCC 7-24-225

☐ UNLICENSED PUBLIC PASSENGER
VEHICLE MCC 9-112-555

☐ OTHER MCC VIOLATION
(CITE VIOLATION IN NARRATIVE)

☐ OTHER ILCS VIOLATION
(CITE VIOLATION IN NARRATIVE)

6. SEIZURE (Check one)

☐ SEIZURE 625 ILCS
5/4-107(b)

☐ SEIZURE 720 ILCS
5/36-1

☐ FORFEITURE 720 ILCS
550/12

☐ FORFEITURE 720 ILCS
570/505

7. OTHER (Check one)

☐ HOLD FOR
INVESTIGATION

☐ WANTED VEHICLE

☐ HOLD FOR
CONFIDENTIAL
VIN CHECK

☐ OTHER VIOLATION
(CITE VIOLATION IN
NARRATIVE)

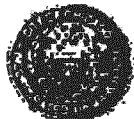
8. PLATE NUMBER		9. MOTOR VEHICLE INVENTORY NO.		POUND	10. YEAR
11. MAKE	12. MODEL	13. BODY STYLE	14. VIN		
Nissan	Sentra	4dr			
15. STATE	MO./YR./EXP.	16. CITY LICENSE NO.	CITY	EXP. YR.	
IL	5/11				
17. NAME OF OWNER	18. ADDRESS	19. HOME PHONE	20. BUSINESS PHONE	21. OWNERSHIP VERIFIED	
		()	()	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
22. NAME OF DRIVER	23. ADDRESS	24. HOME PHONE	25. BUSINESS PHONE	26. LD. VERIFIED	
		()	()	<input type="checkbox"/> YES <input type="checkbox"/> NO	
27. PERSONAL PROPERTY IN VEHICLE		28. PROPERTY INVENTORY NO.			
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		D - N - A			
29. PROPERTY INVENTORIED BY - NAME		STAR NO.	DISTRICT	DATE/TIME	

30. VEHICLE INVENTORY

EXTERIOR	NO	YES	ENGINE COMPARTMENT	NO	YES	UNK	INTERIOR	NO	YES	UNK
DOORS LOCKED	<input checked="" type="checkbox"/>	<input type="checkbox"/>	AIR CONDITIONING	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	AIR BAG DAMAGED (ATTEMPT THEFT)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DOOR LOCKS PUNCHED	<input checked="" type="checkbox"/>	<input type="checkbox"/>	COMPRESSOR MISSING	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	AIR BAG MISSING (THEFT)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
EXTERIOR DAMAGED	<input checked="" type="checkbox"/>	<input type="checkbox"/>	ALTERNATOR/GENERATOR MISSING	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	COMPUTER MICRO PROCESSOR CHIP MISSING	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
GLASS BROKEN	<input checked="" type="checkbox"/>	<input type="checkbox"/>	BATTERY MISSING	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	C.B. RADIO IN VEHICLE	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HUB CAPS MISSING	<input checked="" type="checkbox"/>	<input type="checkbox"/>	CARBURETOR MISSING	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	C.D. PLAYER IN VEHICLE	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SUN ROOF MISSING	<input checked="" type="checkbox"/>	<input type="checkbox"/>	ENGINE MISSING	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	CUSHIONS MISSING	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TIRE(S) MISSING	<input checked="" type="checkbox"/>	<input type="checkbox"/>	RADIATOR MISSING	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	GLOVE BOX LOCKED	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TIRE(S) SWITCHED	<input checked="" type="checkbox"/>	<input type="checkbox"/>	STARTER MISSING	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	IGNITION DAMAGED/PULLED	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
T-TOP MISSING	<input checked="" type="checkbox"/>	<input type="checkbox"/>	TRANSMISSION MISSING	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	INTERIOR DAMAGED	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
WHEELS MISSING	<input checked="" type="checkbox"/>	<input type="checkbox"/>	OTHER - SPECIFY	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	KEYS IN VEHICLE	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SPARE TIRE IN VEHICLE	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	REAR SEAT CUSHIONS PULLED	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TOOLS IN VEHICLE	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	RADIO MISSING	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TRUNK LOCKED	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SEATS MISSING	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TRUNK LOCK PUNCHED	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	TABE PLAYER IN VEHICLE	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
OTHER - SPECIFY	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	OTHER - SPECIFY	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

31. FOLLOW-UP INVESTIGATING UNIT NOTIFIED BY		32. PERSON NOTIFIED		UNIT NOTIFIED	DATE/TIME
33. OFFICER REQUESTING TOW		STAR NO.	UNIT/ASSIGN.	34. OFFICER REQUESTING TOW	STAR NO. UNIT/ASSIGN.
Pamela		7259	017		
35. STREETS AND SANITATION NO.		36. DATE/TIME TOW ORDERED		37. DATE/TIME INVESTIGATION COMPLETED	
054806		5 NOV 11 0230			
38. TOW DRIVER'S NAME		TRUCK NO.	DATE/TIME	39. SUPERVISOR APPROVING	
15112		11-5-11		STAR NO. DATE/TIME	

3:46AM



City of Chicago
RICHARD M. DALEY
MAYOR

NOTICE OF VEHICLE IMPOUNDMENT

STREETS & SANITATION
DEPARTMENT OF
STREETS AND SANITATION
(312) 742-6121
FAX (312) 742-6150

This vehicle identified below is being impounded by the City of Chicago because (check the appropriate box(es)):

- ☒ It was driven by or in the actual physical control of a person under the influence of alcohol, intoxicating compound(s), other drug(s), or any combination thereof, as defined by 625 ILCS 5/11-501 in violation of Section 7-24-226(a) of the Municipal Code of Chicago.
- ☐ It was found to contain an unregistered firearm, a firearm that was not disassembled into a non-functioning condition or a laser sight accessory in violation of the Municipal Code of Chicago Section 8-20-070.
- ☐ It was used to solicit or patronize a prostitute or to commit an act of prostitution in violation of Section 8-8-060(d) of the Municipal Code of Chicago.
- ☐ It was used to dump or deposit or cause to be dumped or deposited on a lot, or parcel of real estate within the City of Chicago garbage, ashes, refuse, trash, miscellaneous waste (fly dumping) in violation of Section 7-28-440(b) of the Municipal Code of Chicago.
- ☐ It was found to contain controlled substances or cannabis, as defined in the Controlled Substances Act, 720 ILCS 570/100 et seq. and the Cannabis Control Act, 720 ILCS 550-1 et seq. or that it was used in the purchase, attempt to purchase, sale or attempt to sell controlled substances or cannabis, in violation of Section 7-24-225 of the Municipal Code of Chicago.
- ☐ It was operated or parked on the public way bearing a false, stolen or altered state temporary registration permit in violation of Section 9-80-220 of the Municipal Code of the City of Chicago.
- ☐ It was operated by a person whose driver's license was suspended or revoked for violation of Section 9-80-240 of the Municipal Code of Chicago.
- ☐ In violation of Section _____ of the Municipal Code of Chicago, for _____ (description of violation)

Amount of Substance _____ Type _____
R.D. No. _____ Date of Impoundment 5/10/11 Time of Impoundment 0200
Vehicle Towed From (Address): _____
Officer Seizing Vehicle: Panah Star No. 7259 Watch 1
Beat Assigned: 179 SR Beat Occurred: 1731 Unit 017 Bell _____ Pax _____
Court Date: 13 Dec 11 Day Off Ground: 1 Furlough: 98
Owner's Name: _____
Owner's Address: _____ City Chicago State _____ Zip _____
Arrestee's Name: _____
Arrestee's Address: _____ City _____ State _____ Zip _____
(Attach copy of lead sheet and case report, send copies to DSS and OCD)

VEHICLE IDENTIFICATION

Pursuant to Section 2-14-132(10) of the Municipal Code of Chicago, I have affixed to vehicle's _____ window a warning notice that the vehicle is subject to seizure for purposes of impoundment.

V.I.N.: _____
Make: Nissan Yr.: 00 Color: gray Body Style: 4dr
Lic. Plate No: _____ State: IL Exp. Date: 5/11

Under penalties as provided by law pursuant to Section 1-109 of the Illinois Code of Civil Procedure, the undersigned certifies that the statements set forth in this instrument are true and correct.

Panah 7259
Signature of Issuing Officer/Star

☐ Licensholder only
☐ Declined
☐ Forfeiture Pending

OCD REVIEW ONLY:

Reviewed Date _____ By: _____

White Copy—Vehicle Impoundment • Yellow Copy—Respondent • Pink Copy—Asset Forfeiture Unit, OCD • Gold Copy—Streets and Sanitation

RV100